

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10253491**
APPLICANT(S)

FILED DATE

CLAIMS

	AD FILIO		ADULTITY ASSIGNMENT		ADULT BLD ASSIGNMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16	1	1				
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29	1	1				
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37		1				
38		1				
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45	1	1				
46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.	4					
TOTAL DEP.	57					
TOTAL CLAIMS	61					

	CHD	DEP	CHD	DEP	CHD	DEP
51		1				
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		2				
59		2				
60						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						